## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                   |                               |              |                  |        | SMALL ENTITY TYPE   |                        |        | OTHER THAN          |                        |
|---|--|---|-------------------|-------------------------------|--------------|------------------|--------|---------------------|------------------------|--------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | 15`               |                               |              |                  | 1      | RATE                | FEE                    | 1      | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED      |                               | NUMBER EXTRA |                  |        | BASIC FEE           | 375.00                 | OR     | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | ) minus 20=       |                               | * \$         |                  |        | X\$ 9=              |                        | OR     | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | minus 3 =         |                               | <u>*</u> %   |                  |        | X42=                |                        | OR     | X84=                |                        |
| MU  | LTIPLE DEPEN                                   | RESENT                                    | ESENT             |                               |              |                  | +140=  |                     | OR                     | +280=  |                     |                        |
| * If  | the difference                                 | in column 1 is                            | less than ze      | ro, enter                     | "0" in c     | olumn 2          | ,      | TOTAL               | 315                    | OR     | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II   |  |   |                   |                               |              |                  |        |                     |                        |        | OTHER               |                        |
| _   |  | (Column 1)<br>CLAIMS                      |                   | (Colur                        |              | (Column 3)       |        | SMALL               |                        | OR     | SMALL               |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                   | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **                            |              | =                |        | X\$ 9=              |                        | OR     | X\$18=              |                        |
|   | Independent                                    | *   | Minus             |                               |              | -                | П      | X42=                |                        | OR     | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                   |                               |              |                  |        | +140=               |                        | OR     | +280=               |                        |
|   |  |   |                   |                               |              |                  |        | TOTAL<br>ADDIT, FEE |                        | OR     | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                   |                               |              |                  |        |                     |                        |        |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **                            |              | =                |        | X\$ 9=              |                        | OR     | X\$18=              |                        |
|   | Independent                                    | *   | Minus             | ***                           |              | <u> </u>         | 11     | X42=                |                        | OR     | X84=                |                        |
| L   | FIRST PRESE                                    | NTATION OF MU                             | JUIPLE DEF        | ENUENI                        | CLAIM        |                  | ۱ ۱    | +140=               |                        | OR     | +280=               |                        |
|   |  |   |                   |                               |              |                  |        |                     |                        | OR     | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                   |                               |              |                  |        |                     |                        |        |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVIO<br>PAID | BER          | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus             | **                            |              | =                | 11     | X\$ 9=              |                        | OR     | X\$18=              |                        |
|   | Independent                                    | *   | Minus ***         |                               | - 01 4114    | =                | 11     | X42=                |                        | OR     | X84=                |                        |
| Ш   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                               |              |                  |        | +140=               |                        | OR     | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FOR |  |   |                   |                               |              |                  |        |                     |                        |        | TOTAL               |                        |
| 444   | If the "Highest Nu                             | mber Previously Pa                        | aid For" IN THI   | S SPACE I                     | s less tha   | n 3, enter "3."  |        | ADDIT. FEE          |                        |        | ADDIT. FEE          | لـــــا                |
|   | The "Highest Num                               | ber Previously Pai                        | id For" (Total or | Independe                     | ent) is the  | highest number   | er fou | nd in the app       | ropriate box           | in col | lumn 1,             |                        |